STATEMENT OF

FORM 1	ORGANIZ. (See instruction			Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	e 12FE4M5	
Restore Amer	ica PAC, Inc.			
ADDRESS (number and	P.O. Box 2275			
(Check if address is changed)	,			
	Topeka		KS	66601
		CITY▲	STATE▲	ZIP CODE 🛦
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e	-mail address)		
(Check if address is changed)	t.c.@restoreameric	apac.com		
			111111	1111111
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)	www.restoreameric	apac.com		
				11111111
2. DATE 1.2				
3. FEC IDENTIFICA	TION NUMBER	C C00344333		
4. IS THIS STATEM	MENT X NEW (N) OR	AMENDED (A	4)	
I certify that I have exam	ned this Statement and to the best of my kn	owledge and belief it is true, cor	rect and complete	
	Treasurer T.C. Anderson			
Type or Print Name of	reasurer			
Signature of Treasurer	Electronically Filed by T.C. And	erson	Date 03	/ 21 / 2009
NOTE: Submission of fa	lse, erroneous, or incomplete information ma	ay subject the person signing thi	·	-
Office Use Only		For further informated Federal Election Control Free 800-424-5	mmission 9530	FEC FORM 1 (Revised 02/2009)